PTO/SB/22 (12-04)
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| **PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005** (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | Docket Number (Optional) 59200(71699) |
|---|---|
| Application Number 10/516,809-Conf. #7310 | Filed December 6, 2004 |
| For USE OF A NIGHT-VISION INTENSIFIER FOR DIRECT VISUALIZATION BY EYE OF FAR-RED AND NEAR-INFARED FLUORESCENCE THROUGH AN OPTICAL MICROSCOPE | |
| Art Unit N/A | Examiner Not Yet Assigned |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

| | | Fee | Small Entity Fee | |
|---|---|---|---|---|
| [ ] | One month (37 CFR 1.17(a)(1)) | $120 | $60 | $ |
| [X] | Two months (37 CFR 1.17(a)(2)) | $450 | $225 | $ 225.00 |
| [ ] | Three months (37 CFR 1.17(a)(3)) | $1020 | $510 | $ |
| [ ] | Four months (37 CFR 1.17(a)(4)) | $1590 | $795 | $ |
| [ ] | Five months (37 CFR 1.17(a)(5)) | $2160 | $1080 | $ |

[X] Applicant claims small entity status. See 37 CFR 1.27.

[ ] A check in the amount of the fee is enclosed.

[ ] Payment by credit card. Form PTO-2038 is attached.

[X] The Director has already been authorized to charge fees in this application to a Deposit Account.

[X] The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1105 . I have enclosed a duplicate copy of this sheet.

I am the

[ ] applicant/inventor.

[ ] assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

[ ] attorney or agent of record. Registration Number _____

[X] attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 53,624 .

Signature — July 28, 2005 (Date)

Jonathan M. Sparks (Typed or printed name) — (617) 439-4444 (Telephone Number)

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

[ ] Total of 1 forms are submitted.

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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 654 385 597 US, in an envelope addressed to: Commissioner for Patents, ~~P.O. Box~~ 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 28, 2005 Signature: Sharon Bizokas (Sharon Bizokas)



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